

INCIDENT REPORT

Date & Time Reported to ITOC:	
Agency:	
Reported by: <ul style="list-style-type: none"> ▪ Name ▪ Phone ▪ E-mail 	
Nature of Incident: <ul style="list-style-type: none"> <input type="checkbox"/> Denial of Service <input type="checkbox"/> Malicious Code <input type="checkbox"/> Reconnaissance Scans and Probes <input type="checkbox"/> Unauthorized Access <input type="checkbox"/> Other (describe) 	
Location of Affected Systems: <ul style="list-style-type: none"> ▪ Address ▪ Building/Room 	
Details: (virus name, events, etc)	
Date & Time Occurred:	
Date & Time Detected:	
How was the Incident detected?	
Describe overall business impact of incident:	
<i>Compromised System Details</i>	
System(s) affected <ul style="list-style-type: none"> ▪ Host/node name ▪ Network address 	
Hardware involved <ul style="list-style-type: none"> ▪ Manufacturer ▪ Model 	
O/S <ul style="list-style-type: none"> ▪ Version ▪ Patch level 	
Compromised account name(s) <ul style="list-style-type: none"> ▪ Version ▪ Patch level 	
Compromised software	
Source of attack	
<i>Describe What Actions have been taken so far</i>	
Was system removed from network?	
Audit logs recovered and examined?	

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Which?	
Forensic backups made? Original media secured?	
Describe initial containment measures (firewall, ACL, etc)	
Who has been notified? (e.g. ISP? State Police?) When notified <ul style="list-style-type: none"> ▪ Date and time 	
Technical contact (System/network administrators)	
Additional Information:	